

KanQuit101 Webinar January 2020



KS Tobacco Quitline Transition

- No Changes to:
- Behavioral Health program eligibility and benefits
- Intake Questions stay the same
- Quitline phone number and website stay the same

- Changes:
- New fax referral form and fax number
- BTI online training no longer available. Working with NJH to launch new training in Spring 2020
- Text Message support available for youth and pregnant women
- E-mail support



Quitline 101: Objectives

Quitline 101

- Who are we?
- What is the participant experience?

Programs and Outcomes

- Who is eligible for the program?
- What are the special programs we offer?
- What is our success rate with the participants?

New and Upcoming

- What special populations are we trying to reach?
- How are we changing in this ever-changing market in response to state needs?



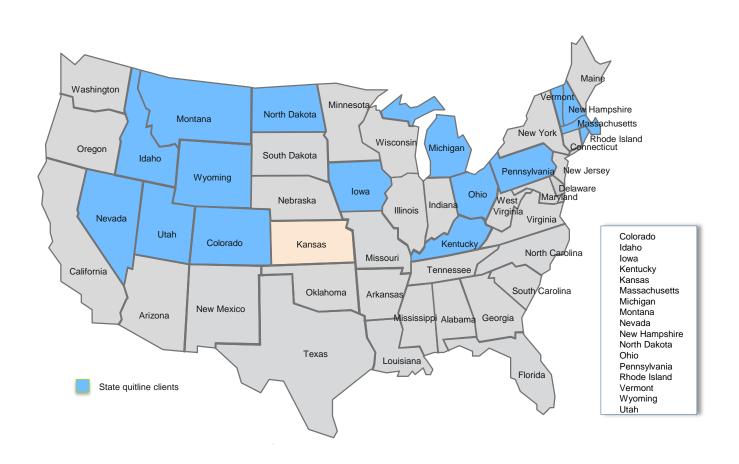


For 120 years, National Jewish Health has been at the forefront of research and medicine. We integrate the latest scientific discoveries with coordinated care for lung, heart and immune diseases.

#1 hospital for 18 consecutive years.



NJH State Quitline Partners





Quitline 101

Quitline is <u>not</u>.

- a hotline
- a one-time fix
- scripted
- staffed by volunteers
- a replacement for medical treatment

Quitline is:

- evidence-based
- supervised by medical and clinical directors
- dedicated and trained professionals
- guided by a national, professional organization







CCR (Customer Care Representative)

- Perform intakes and referral process
- Makes up about 20% of our staff
- Average tenure is 6.2 years

Coach

- Will do some intakes and all coaching
- Makes up about 80% of staff
- Average tenure is 3.5 years
- Arabic and Spanish speaking coaches
- LanguageLine to assist with over 200 other languages

Program Overview

- Participants can enroll by
 - Calling 1-800-QUIT-NOW / 1.855.DEJELO YA
 - Referred by a health care provider (Fax, Web, eReferral)
 - Enroll online
- Open Mon- Sun 24 hours a day, all languages
 - Closed on Thanksgiving and Christmas, early closure on some additional holidays
- 5 Call Program
 - 1 registration and intake call
 - Up to 5 coaching calls (outbound at scheduled times)
 - Unlimited inbound calls for support
- Services
 - Phone, Web, Text / Email, NRT, Materials



Fax Referral:

- Patient information must be completely captured for a valid referral
- Referring provider or entity information must be filled in correctly for follow up
- Any illegible or incomplete referrals will be rejected
- No fee associated with this referral process



Kansas Tobacco Quitline Fax Form

Fax to: 1-800-261-6259

PROVIDER INFORMATION (PRINT CLEARLY)

Feedback will only be sent to HTPAA covered entities to the fax number listed below

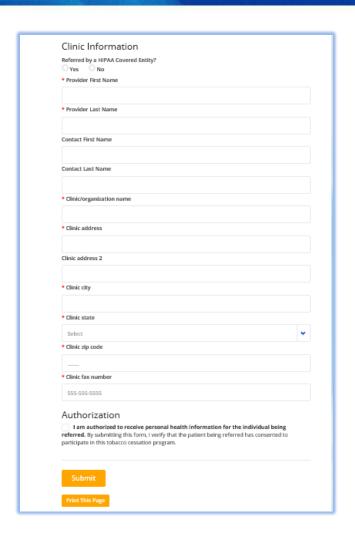
Provider First Name	Provider Last Name
Contact First Name	Contact Last Name
Name of Organization/Hospital/Facility/Employer/Etc.	
Name of Department or Clinic Name (if applicable):	
Address	
city	StateZip
Phone () F	ax for HIPAA covered entity ()
Type of HIPAA Covered Entity: Healthcare Provider□ As a HIPAA covered entity you are authorized to receive pers As a Not Covered Entity, personal health information will not	
Provider consent is required to provide nicotine replaced in the replaced in the properties of the replaced in	acement therapy (NRT) to individuals who have certain medical
Does the patient have any of the following condition (If Provider) I authorize the QuitLine to send the pati	IS? Pregnant□ Breastfeeding□ ient over-the-counter nicotine replacement therapy.
Please sign here if patient may use NRT.	rovider signature Date
P	Provider signature
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	INFORMATION (PRINT CLEARLY)
	INFORMATION (PRINT CLEARLY) (Last)
Patient name (First)	(Last)
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Patient name (First)	(Last)
Patient name (First) Address City Phone () Home Cell Work OK to leave a message at number provided? Yes No i	(Last)
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Confidentiality Notice: This facsimile contains confidential information. If you have received this in error, please notify the sende immediately by telephone and confidentially dispose of the material. Do not review, disclose, copy or distribute.



Web Referral:

- Referring provider or entity will be captured and sent directly to quitline for follow up
- Some fields are required and must be completed before submission
- Clinic or provider information can be stored and saved using cookies or other tracking software so it does not have to be entered for each referral.
- Patient status sent to HIPAA-covered entities by fax back
- No fee associated with this referral process





eReferral:

- Not the same as e-fax
- Direct messaging for CCDs
- Must be HL7v3 compliant
- Use Meaningful Use 2 standards
- A HISP is required before any other steps can happen
- Typically a one-time fee is associated with setting up this referral process

Home / Just Looking / Health Care Provider / How to Refer Patients / eReferral eReferral How the Program Works **Provider FAQs AAR Model** The eReferral Program for smoking cessation helps providers overcome the manual and How to Talk to cumbersome process of Fax referrals and takes advantage of electronic health record (EHR) **Patients About** technology providing improved accuracy of patient data. The program creates ease of both Tobacco referring patients and receiving feedback information on a patient's progress through their How to Refer cessation effort while integrating tobacco cessation into routine clinical care. The program also **Patients** enables health systems to measure the implementation of changes and the impact of these Provider Web changes on outcomes in affected patient populations. Referral eReferral eReferrals send secure, two-way communication between a healthcare provider and the quitline Fax referral through the patient's EHR. Providers receive progress updates using the same system, allowing the provider to stay abreast of their patient's progress towards quitting tobacco. All messages sent through eReferral are HIPAA-compliant to protect patient privacy. **About National** Jewish Health What's the value of implementing an eReferral system? According to Deriver Health, Colorado, "In addition to faster referrals, using the EHR improves data quality and increases the likelihood of a successful referral to the service provider. The public health benefits of transforming paper-based referral systems to an eReferral include developing a sustainable, cost-effective system that has possibilities of reaching higher numbers of patients and ultimately, improve patient outcomes." If you are interested in implementing an eReferral, please submit our Contact Us form to learn



Calling the Quitline

Incoming Call

 Participant calls 1-800 QUITNOW, they are routed to Kansas Tobacco Quitline based on area code (KS resident with outof-state area codes are transferred)

Outbound Call

- Calls are dialed out from an automated system.
- Once a call is answered from the automated system, the call will be transferred to a live coach, so please hold on the line.

Intake and Registration

- Callers are asked a series of questions about tobacco use, medical history and demographic information.
- If identified as a priority population (e.g., American Indian, Pregnant, Behavioral Health or Youth), they will be asked if they want to participate in programs offered by the Kansas Quitline.

Coaching

- Goal is to move directly from intake to coaching for participants who are ready to start their quit journey
- We use 3 proven approaches to our coaching
 - Motivational Interviewing (MI)
 - Stages of Change (SOC)
 - Cognitive Behavioral Therapy (CBT)
- Coaches determine appropriate intervention based on participants SOC
- Coaches use a standardized, unscripted, conversational style of coaching
- Goal is to set up 2nd coaching call at completion of 1st coaching call

Technology



Our customized text program offers motivational messages to participants throughout their quit journey.



Our email program, like the text program offers additional information and support to each participant.



Currently piloting eCoaching which offers the coaching experience through an online chat.





My Quit Journey + 8 page booklet

- Welcome letter
- 3 pieces of static content:
 - Secondhand Smoke
 - Vaping
 - Stress
- 2 personalized pieces (13 possible options)

QuitLine Materials

Science Transforming Life®

Stress is the #1 reason people use tobacco or relapse after quitting.

TOBACCO USE

STRESS &

What Can I do to Reduce Stress?



For more information, visit njhealth.org/quittobaccohelp

Balanced Meals

Personalized Content based on answers to intake

- Priority Group #1
 - Smokeless
 - Pregnancy
 - Teen/Tween
 - LGBT
 - American Indian/Alaskan Native
- Priority Group #2
 - High Blood Pressure
 - Diabetes
 - COPD
- Default Priority List
 - High Blood Pressure
 - Mental Health

Nicotine Replacement

Kansas Nicotine Replacement Therapy Offering:

- Those participants in the Behavioral Health Program are eligible for Patch or Gum
- Those who have Medicaid with valid Medicaid ID # are eligible for Patch, Gum or Lozenge
- Up to 2 weeks of NRT is offered.
- Shipped directly to participants home or facility.





NJH Call Center Operations

Science Transforming Life®

Incoming Calls

- In 2018, we answered on average 15,000 calls per month across all clients.
- Our average speed to answer the phone is under 30 seconds on incoming calls.

Outgoing calls

- In 2018, on average we made 46,000 calls across all clients monthly.
- Referrals are called out on within 1 business day of receiving the referral.



AMERICAN INDIAN

Commercial Tobacco Program

- Dedicated toll-free number (855-372-0037) and website americanindian.quitlogix.org
- Phone or web-phone protocols offered
- 10 coaching calls with dedicated Al coaches
- 7 reset attempts for enrolled participants
- 3 reset attempts for referrals





My Life My Quit

- Dedicated toll-free number to text or call (855-891-9989) and website <u>mylifemyquit.com</u>
- Phone, web, phone-web protocols offered for youth <18</p>
- 5 coaching sessions by phone, text or online chat with youth coach specialist pool
 - Certificate of Completion for mandated callers available for phone coaching only
- Tailored automated texting program for youth and content for vaping
- Simplified registration and intake process
- Promotional and education materials developed with youth input with messages for youth







MY LIFE MY QUIT



Educators

What is the My Life, My Quit™ program?

The My Life, My Quit program is a free and confidential service developed by National Jewish Health, the nation's number one respiratory hospitals for teens who want help quitting all forms of tobacco including vaping. Our tobacco treatment specialists have completed estensive training on adolescent cognitive and psychospital development from a psychologist, and professor at Stanford University who specializes in adolescent tobacco prevention.

enrolling, teen participants receiv

- Five, one-on-one coaching sessions usually scheduled every 7-10 days. Coaching helps teens develop a quit plan, identify triggers, practice refusal skills and receive ongoing support for changing behaviors.
- Self-help and educational materials designed for teens, with input from teens.
 Additional support by phone, by text message or by online chat.
- As an educator, you have as much (or more) contact with teens as their parents and healthcare professionals and the messages you provide often shape their behavior choices. Your

promotion of the My Life, My Quit program is important to teens looking for resources quit using tobacco.

National Jewish Health operates tobacco quitines in numerous states around the country and has helped more than one million people with their quit attemots.

How do I help teens stop smoking or vaping?

and e-cigarettes. If a teen asks yo

Nicotine addiction can hap All tobacco products, inck

Teens want their teachers and sch Community Agency

What is the My Life, My Quit™ program?

The My Life, My Quit program is a free and confidential service for tenes who want help quitting all forms of tobacco including wangs. Our coaches receive extensive training as tobacco treatment specialists through our CTTTP—accredited program, with additional training on adolescent cognitive and psychosocial developmentfrom a psychologist and professor at Stanford University who specializes in adolescent tobacco prevention.

Coaches use motivational interviewing and cognitive-behavioral techniques to help teens:

- Develop a quit plan.
- Identify triggers for tobacco use.
- Practice refusal skills.
- Obtain ongoing support for changing behaviors.

Teens who participate in the program receive:

- . Five, one-on-one coaching sessions usually scheduled every 7-10 days.
- . Self-help and educational materials with input from teens.
- Real-time support available anytime over the phone, and with limited hours by text

 mescarine or online that

My Life, My Quit does not provide cessation medications to anyone under age 18. Teens who request medications are referred to a healthcare professional to discuss whether medications are an option to support their quit attempt.

My Life. My Quilt is developed and operated by National Jewish. Health, the nations leading respiratory hospital and academic research center.

National Jewish Health operates quittine programs in numerous states and has helped more than one million people with their quit attempts. My Life, My
Quit is funded for use in your state by the department of health as part of the quittine program.

How can we promote or refer teens to My Life, My Quit?

While the decision to quit tobacco is always one teens must make themselves, there are several ways you can help promote the My Life, My Quit program

- Let teens know that you are concerned about the impact of tobacco use, including vaping, on their current and long-term health.
- Tell them you want to support their plan to stop and ask if they will sign up for the My Life, My Quit program. Be sure to mention it is free and confidential.
- If they are not willing to enroll right then, provide them with information about how to





Parents/Guardians

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How do I talk to my teen about tobacco and vaping?

As a parent, you may feel shocked, hurt or angry when you discover your teen is using a tobacc product like digerettes or ancetine valeng device. Dour may not even know what a syning device is when you find see it, to baccc companies have made them so small and easy to hold by first instruct may be to confront your dried and discipline them for using to blocks. But, this may make them even more scoretive about their incotine use and unwilling to discuss the issue.



• Learn about tobacco and vaping products. Turn to reputable sources for information



Healthcare Professionals

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- If they are not willing to enroll right then, provide them with information about how



CHELINAN

Free Promotional Materials

All materials on the mylifemyquit.com website are copyrighted by National Jewish Health, and are available for use without further permission by citing National Jewish Health as the source.

Additional marketing and education materials are available. Email healthinitiatives@njhealth.org to request a Marketing and Media Toolkit.

Posters

You can download and print My Life, My Quit posters to display in your classroom and school. Or, contact your state health department for printed materials to be mailed to you.



8.5" x 11" PDF



8.5" x 11" PDF



8.5" x 11" PDF



8.5" x 11" PDF



8.5" x 11" PDF



Download All Posters 8.5" x 11" PDF 11" x 17" PDF





STRESS & COPING

Quitting smoking and vaping can be hard! Stress is the number one reason people go back to using nicotine.

HOW TO MANAGE STRESS AND NICOTINE WITHDRAWAL

















ARE YOU A TARGET?

Tobacco companies have a problem — their customers keep dying. They want teens to be the replacement and they will work hard to get you.

For more information, call or text 1-855-891-9989

HOW TO TELL WHEN TEENS ARE THE TARGET



















DON'T BE A TOBACCO TARGET. CALL OR TEXT A COACH TODAY TO LEARN HOW.

For more information, call or text 1-855-891-9989 or visit online at mylifemyquit.com

IT'S STILL TOBACCO

Nicotine comes from the tobacco plant. Even though it comes in many forms, all tobacco products are addictive.

THESE ARE ALL TOBACCO PRODUCTS.



TALK OR CHAT WITH TO HELP YOU QUIT USIN

For more information, call or text 1-855-891-9989

Because teen brains are rapidly developing nicotine addiction happens very quickly. Almost 90% of adults who use nicotine start as teens.

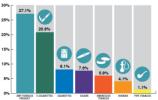
STOP NICOTINE FROM HACKING YOUR BRAIN. TALK OR CHAT WITH A COACH

For more information, call or text 1-855-891-9989 or visit online at mylifernyquit.com.

MOST TEENS DON'T

Knowing the facts about tobacco can help you make your own decisions.

TEEN TOBACCO USE RATES





LEARN MORE ABC For more information, call or text 1-8:

ASKING FOR HELP

Many young people know they need to stop smoking or vaping and may not know how to ask for help. You don't have to go through it alone.

WHO TO ASK

You can ask more than one person for support. Pick someone you know will listen and won't criticize your choices such as...



Ask your doctor. If you are having an hard time stopping smoking or vaping, your doctor may be able to prescribe medications to make it easier.









WHAT TO SAY

- Share the information you are reading about tobacco or vaping. Tell them that you are trying to quit and you want their support.
- . Share the reasons you are trying to guit.
- Talk about what you are feeling emotionally and physically.



For more information, call or text 1-855-891-9989 or visit mylifemyquit.com

Special Programs

Pregnancy and Post-Partum Protocol (PPP)

- Pilot started in 2010 and is now being offered to all NJH state clients.
- 9 Coaching Calls
 - 5 during pregnancy & 4 during post partum
- Same dedicated Quitline coach for all calls
- Must be currently pregnant to enroll in this special program
- Tailored text messages & email throughout program
- Kansas does not offer NRT to Pregnant women.

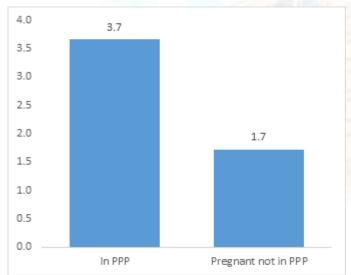
Special Programs

PPP quit outcomes

 Quit rate for PPP participants vs. Participants identifying as pregnant at intake and not in the program. Based on 12-month surveys in 2016 and

PPP	#Participants	# Reached	# Quit	Responder Quit Rate
In PPP	984	111	46	41%
Pregnant Not in PPP	163	20	4	20%

 Average coaching calls for PTs in the PPP program vs. pregnant PTs in the standard program (2016-2017 survey period)





Behavioral Health

Tailored protocol for depression or anxiety:

- Coaching training on working with people who report behavioral health conditions
- Structured interventions with up to 7 calls with additional cognitive-behavioral techniques to manage mood disorder
- NRT offered in 2 week offering.



eCoaching
National Jewish Health (NJH) partnered with state clients to develop an eCoaching pilot for online participants to connect with a Coach.

Definitions

- eCoaching: Chat interaction from logged-in pages with coaching content similar to phone coaching.
- **General inquiry chat**: Interaction on chat limited to questions and program details. Visitors can initiate general inquiry chat via the home pages without creating a web account, and program participants can also initiate general inquiry chat when logged in to their web account (if no coaching content).



Questions